Will 0 1 2001 55

PTO/SB/06 (05-03)
Approved for use through 4/30/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE aguired to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of PATENT APPLICATION EE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 TWA85USA CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY (Cotumn 1) (Column 2) NUMBER EILED FOR NUMBER EXTRA RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS minus 20 = (37 CFR 1.16(c)) OR INDEPENDENT CLAIMS 0 (37 CFR 1.16(b)) minus 20 = OR = MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.15(d)) OR + 5 If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) (Column 1) SMALL ENTITY **SMALL ENTITY** CI AIMS REMAINING PRESENT ADDI-TIONAL ADDI-TIONAL NUMBER RATE RATE PREVIOUSLY **EXTRA** AMENDMENT PAID FOR FEE FEE Total (37 CFR 1,16(c)) AMENDM 2 20 0 X S # OR 1 0 independent (37 CFR 1,16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +5 OR TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE RATE ADDI-ADDI-AFTER AMENDMENT PREVIOUSLY EXTRA TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus Ð OR Independent (37 CFR 1.19(b)) OR Y 1 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) HIGHEST NUMBER CI AIMS REMAINING PRESENT RATE ADDI-RATE ADDI-AFTER **EXTRA** TIONAL TIONAL <u>AMENDMENT</u> PAID FOR FEE FEE Total (37 CFR 1.18(c)) Minus OR independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.15(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * It the entry in control is a less than the entry in control 2, while a microsimist.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in

the "highest number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the 1 individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chie 1 information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORM S TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.